"FEE ADDRESS" INDICATION FORM

Address to: **Mail Stop M Correspondence** **Commissioner for Patents** **- OR -** **P.O. Box 1450** **Alexandria, VA 22313-1450**	Fax to: **571-273-6500**

INSTRUCTIONS: The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. **When to check the first box below:** If you have a Customer Number to represent the fee address. **When to check the second box below:** If you have no Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.

For the following application(s) listed on the attached **Schedule A** submitted with the Power of **Attorney and Correspondence Address Indication Form and Statement Under 37 C.F.R. §3.73(b) filed concurrently herewith, please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:**

<div align="center">

21967

</div>

☒   CUSTOMER NUMBER:

OR

☐   The attached Request for Customer Number (PTO/SB/125) form.
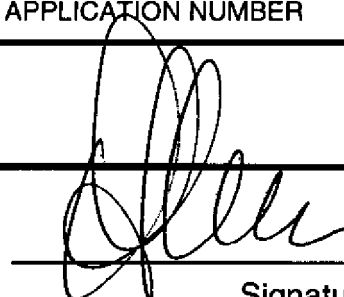
PATENT NUMBER (if known)	APPLICATION NUMBER

Completed by (check one):

☐   Applicant/Inventor

☒   Attorney or Agent of Record   **43,606**
                                       (Reg. No.)

☐   Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR § 3.73(b) is enclosed. (Form PTO/SB/96).

☐   Assignee recorded at Reel _____ Frame _____

_____
Signature

Ozzie A. Farres
_____
Typed or printed name

202-955-1500
_____
Requester's telephone number

8/18/08
_____
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒   *Total of ___**1**___ forms are submitted.